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7590

07/27/2005

Rockwell Collins, Inc.

Attention: Kyle Eppelc

M/S 124-323

400 Collins Rd. NE

Cedar Rapids, IA 52498

09/06/2005 HDEHSS2 00000087 181722 09849750

01 FC:1501 1400.00 DA

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Sheila K. Mathers

(Depositor's name)

Sheila K. Mathers

(Signature)

September 6, 2005

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/849,750	05/04/2001	David W. Jensen	00CR032/KE	2666

TITLE OF INVENTION: IMAGE PROCESSING WARNING SYSTEM

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$0	\$1400	10/27/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
COUSO, YON JUNG	2625	382-104000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Nathan O. Jensen

2 Kyle Eppelc

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Rockwell Collins

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Cedar Rapids, IA

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
- ☐ Publication Fee (No small entity discount permitted)
- ☐ Advance Order - # of Copies _____

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- ☐ A check in the amount of the fee(s) is enclosed.
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- ☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 18-1722 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Kyle Eppelc

Date

9-6-2005

Typed or printed name

Kyle Eppelc

Registration No.

34,155

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Facsimile

Intellectual Property Department
400 Collins Rd. NE M/S 124-323
Cedar Rapids, IA 52498

**Rockwell
Collins**

To:	Mail Stop: Issue Fee	From:	Sheila K. Mathews
Location:	US Patent Office	Location:	124-323
Fax:	571-273-2885	Fax:	319-295-8777
Tel:		Tel:	319-295-4862
Pages:	3 (including Lead)	Date:	September 6, 2005

Applicant: D. Jensen
Serial No. 09/849,750
Filed: May 4, 2001
For: Image Processing Warning System
Docket No. 00CR032/KE
Item: Issue Fee Transmittal in duplicate.

Thanks,

Sheila Mathews****NOTICE TO RECIPIENT****

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